PATENT APPLICATION FOR DETERMINE									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10699138						
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
L	OTAL CLAIMS	S	16	6				RATE	FE		• •	RATE	FEE		
F	OR		NUMBER FILED		NUM	NUMBER EXTRA		BASIC F	EE 385	.00	OR	BASIC FE			
Ţ	OTAL CHARGE	ABLE CLAIMS	6 minus 20=		•	0		X\$ 9:			OR	X\$18=	1		
IN	DEPENDENT (	CLAIMS	,	/ minus 3 =		S		X43=		$\dashv$	•	X86≈			
M	ULTIPLE DEPE	NDENT CLAIM F	RESENT .				1	+145=	+	$\neg$	OR		<del> </del>		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	<del>ر را</del>	<del></del>	OR.	+290=	ļ		
									100	الد	RC	TOTAL	<u> </u>		
	/3	(Column 1)	(Column 2) (Colum			(Column 3)		SMAL	L ENTIT	Y C	R		THAN ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	LER USLY	PRESENT EXTRA		RATE	ADD TION	AL		RATE	ADDI- TIONAL FEE		
	Total	. 6	Minus	- 2	2	. —		X\$ 9=			R	X\$18=			
AME	Independent	• NTATION OF M	Minus	2	<u> </u>			X43=		$\neg$	R	X86=			
Щ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		<b>-</b>   [		+290≠			
5/22/j.j.							·L	TOTA		-√	R R	TOTAL			
(Column 1) (Column 2) (Column 3)								DOIT. FE	E	۳,		ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	SŤ ER JSLÝ	PRESENT EXTRA		RATE	ADDI TIONA	IL .	-	RATE	ADDI- TIONAL		
	Total	. 6	Minus	- 26	)	· (X)	ı	X\$ 9=		7		X\$18=	FEE_		
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=	1		T	+290=			
		L	TOTAL			Ĺ	TOTAL	+							
(Column 1) (Column 2) (Column 3)															
ENIC		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONA		ſ	RATE	ADDI- TIONAL		
MENDIN	Total	•	Minus	44				X\$ 9-	FEE	┧	ŀ	X\$18=	FEE		
	Independent	:	Minus	444			$\vdash$			ᅥᅊ	<b>'</b>  -				
4 [	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X43≈		OF	L	X86≃			
- u	the entry in colum	nn 1 is less than the	entry in cobs	nn 2. write Y	·	mn 3	Ŀ	145=		OR	L	+290≈			
—(I)	una "Hughast Num The "Highest Num	niber Previously Pain niber Previously Paid per Previously Paid	d For IN THIS d For IN THIS	S SPACE IS 18 S SPACE IS 18	es than	20, enter "20."		TOTAL DIT. FEE		].OR	AE	TOTAL DOTT. FEE			